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| Fill in this information to identify your case: | | |
|---|-------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | | |
|----|--|---|-----|---|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for | Alicia First name | | First name |
| | example, your driver's license or passport). | Middle name | | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Dodson Last name and Suffix (Sr., Jr., II, III) | — - | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | 3 | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-0245 | | |

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Case number (if known) Debtor 1 Alicia Dodson

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|--|--|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 438 Perrie Drive Apt. 301 Elk Grove Village, IL 60007 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |

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Case number (if known) Debtor 1 Alicia Dodson

| ar | Tell the Court About | Your E | 3ankruptcy Ca | ase | | | | | |
|-----|---|--------------------------|----------------|---|---|--|-------|--|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bankru | ptcy | | |
| | choosing to file under | ■ Chapter 7 □ Chapter 11 | | | | | | | |
| | | | | | | | | | |
| | | | Chapter 12 | | | | | | |
| | | | Chapter 13 | | | | | | |
| | | | | | | | | | |
| 3. | How you will pay the fee | | about how yo | ou may pay. Typio attorney is subm | cally, if you are paying the fee yo | with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, or alf, your attorney may pay with a credit card or che | money | | |
| | | | | | Illments. If you choose this optic (Official Form 103A). | n, sign and attach the Application for Individuals to | o Pay | | |
| | | | | | | only if you are filing for Chapter 7. By law, a judgour income is less than 150% of the official poverty | | | |
| | | | applies to you | ur family size and | I you are unable to pay the fee ir | installments). If you choose this option, you must ial Form 103B) and file it with your petition. | | | |
| | | | шо пррпоси | on to have the or | aptor 17 ming 1 00 Walvou (Ome | ian of the root, and the few with your polition. | | | |
|). | Have you filed for | ■ N | 0. | | | | | | |
| | bankruptcy within the last 8 years? | ПΥ | es. | | | | | | |
| | • | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | | | | | | | |
| 10. | Are any bankruptcy cases pending or being | ■ N | 0 | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ΠY | es. | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your residence? | ■ N | o. Go to I | ine 12. | | | | | |
| | | ПΥ | es. Has yo | our landlord obtain | ned an eviction judgment agains | t you and do you want to stay in your residence? | | | |
| | | | | No. Go to line 12 | 2. | | | | |
| | | | | Yes. Fill out <i>Initi</i> bankruptcy petit | | Judgment Against You (Form 101A) and file it with | this | | |
| | | | | | | | | | |

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Document Page 4 of 56 Case number (if known) Debtor 1 Alicia Dodson Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Alicia Dodson Explain Your Efforts to Receive a Briefing About Credit Counseling

Part 5:

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 56 Case number (if known) Debtor 1 Alicia Dodson Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million **\$0 - \$50,000** □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Alicia Dodson Signature of Debtor 2 Alicia Dodson Signature of Debtor 1 Executed on Executed on September 13, 2017 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Alicia Dodson Page 7 07 56 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ John P. | Carlin | Date | September 13, 2017 |
|-----------------|------------------------|---------------|--------------------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| | | | |
| John P. Ca | rlin | | |
| Printed name | | | |
| John Carlin | 1 | | |
| Firm name | | | |
| 1305 Remi | ngton Road | | |
| Suite C | | | |
| Schaumbu | rg, IL 60173 | | |
| Number, Street, | City, State & ZIP Code | | |
| Contact phone | 847-843-8600 | Email address | jcarlin@suburbanlegalgroup.com |
| 6277222 | | | |
| Bar number & St | ate | | |

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| | | Docum | till Paue o Ul 30 | | |
|---------------------|--------------------------|-------------------|-------------------|---|---------------------------------------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Alicia Dodson | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | _ | - 0 |
| (if known) | | | | L | Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as Value o | ssets of what you own |
|-----|--|--------------------|-------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 20,270.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 20,270.00 |
| Pa | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 14,295.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 72,200.00 |
| | Your total liabilities | \$ | 86,495.00 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,968.34 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,307.00 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 3. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sch | nedules. |
| | ■ Yes | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Case number (if known) Document

Debtor 1 Alicia Dodson

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$ 4,721.83 |
|----|--|----------------|
| | | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| 5 D (4 D (4) 5/5 d) (1) | Tota | al claim |
|--|------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 36,559.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 36,559.00 |

Case 17-27353 Doc 1 Filed 09/13/17 Entered 09/13/17 11:25:34 Desc Main Document Page 10 of 56 Fill in this information to identify your case and this filing: Debtor 1 Alicia Dodson Middle Name Last Name First Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Nissan Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Sentra Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2014 Debtor 2 only Current value of the Current value of the 41000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another car \$15,000.00 \$15,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$15,000.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

| Debtor 1 | Case 17-27353 Alicia Dodson | Doc 1 | Filed 09/13/17 Document | Entered 09/13/17 11:: Page 11 of 56 Case number | | Desc Main |
|--------------------------------------|---|---|--|---|---------------|---|
| ■ Yes. | Describe | | | | _ | |
| | nothing | ed househo expensive, ture purcha | | o years | | \$1,250.00 |
| 7. Electron Example | | | | oment; computers, printers, scanner | rs; music col | lections; electronic devices |
| 8. Collectile Example No | other collections, memo | | | oks, pictures, or other art objects; st | amp, coin, c | r baseball card collections; |
| 9. Equipmo | ent for sports and hobbieses: Sports, photographic, exmusical instruments Describe | | other hobby equipment; | bicycles, pool tables, golf clubs, ski | s; canoes ar | d kayaks; carpentry tools; |
| 10. Firearn <i>Examp</i> ■ No | | s, ammunitior | n, and related equipmen | t | | |
| □ No ´ | s bles: Everyday clothes, furs, Describe | , leather coat | s, designer wear, shoes | , accessories | | |
| | used clo | othing | | | | \$300.00 |
| ■ No □ Yes. 13. Non-fa Examp | | , , | engagement rings, wed | ding rings, heirloom jewelry, watche | es, gems, go | d, silver |
| | three ca | ats | | | | \$0.00 |
| ■ No | her personal and househo | - | u did not already list, i | ncluding any health aids you did | not list | |
| | the dollar value of all of yo art 3. Write that number he | | | ny entries for pages you have atta | ached | \$1,550.00 |
| | scribe Your Financial Assets vn or have any legal or eq | uitable inter | est in any of the follow | vina? | | Current value of the |
| , | ,gu. 31 34 | | , 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, | ÿ . | | portion you own? Do not deduct secured claims or exemptions. |

page 2

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24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

page 3

| | | Case 17-27353 | Doc 1 | Filed 09/13/17 Document | Entered 09/13/17 11:25:34 Page 13 of 56 | Desc Main | | |
|--|------------------|--|--------------------------------|--|---|---|--|--|
| De | ebtor 1 | Alicia Dodson | | | Case number (if known) | | | |
| | ■ No □ Yes | Institution na | me and desc | ription. Separately file th | ne records of any interests.11 U.S.C. § 521(c): | | | |
| 25. | Trusts, ■ No | equitable or future intere | sts in prope | rty (other than anythin | g listed in line 1), and rights or powers exe | rcisable for your benefit | | |
| ☐ Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property | | | | | | | | |
| | Examp ■ No | s, copyrights, trademarks les: Internet domain names Give specific information a | , websites, p | | | | | |
| | Examp ■ No | es, franchises, and other les: Building permits, exclu | sive licenses | | n holdings, liquor licenses, professional licens | es | | |
| M | oney or p | property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. | | |
| 28. | Tax ref | unds owed to you | | | | | | |
| | ■ No □ Yes. 0 | Give specific information ab | oout them, inc | cluding whether you alre | ady filed the returns and the tax years | | | |
| | ■ No | | | usal support, child supp | ort, maintenance, divorce settlement, property | settlement | | |
| 30. | | mounts someone owes y les: Unpaid wages, disabili benefits; unpaid loans | ty insurance p | | efits, sick pay, vacation pay, workers' comper | nsation, Social Security | | |
| | ☐ Yes. | Give specific information | | | | | | |
| 31. | | ts in insurance policies les: Health, disability, or life | insurance; h | nealth savings account (| HSA); credit, homeowner's, or renter's insurar | nce | | |
| | Yes. I | Name the insurance compa Com | ny of each po pany name: | olicy and list its value. | Beneficiary: | Surrender or refund value: | | |
| | | | n life insurai ent cash val | nce through employer ue | r - no | \$0.00 | | |
| | If you a someon | ne has died. | ue you from g trust, exped | someone who has die t proceeds from a life in | ed surance policy, or are currently entitled to rece | eive property because | | |
| | ⊔ Yes. | Give specific information | | | | | | |
| | Examp ■ No | les: Accidents, employmen | | | it or made a demand for payment s to sue | | | |
| | | Describe each claim | | | | | | |
| | ■ No | | ed claims of | every nature, includin | g counterclaims of the debtor and rights to | set off claims | | |
| | ⊔ Yes. | Describe each claim | | | | | | |

page 4

| Debt | or 1 | Alicia Dodson | Document | Page 14 of | Case number (if known) | |
|--------|-------------|--|------------------------|------------------------|--------------------------|------------------|
| | No | ancial assets you did not already list Give specific information | | | | |
| 36. | | he dollar value of all of your entries from trt 4. Write that number here | | | | \$3,720.00 |
| Part : | 5: De | scribe Any Business-Related Property You O | wn or Have an Interes | In. List any real esta | ite in Part 1. | |
| • | No. Go | own or have any legal or equitable interest in to Part 6. o to line 38. | any business-related | property? | | |
| Part (| | scribe Any Farm- and Commercial Fishing-Re ou own or have an interest in farmland, list it in P | | vn or Have an Interes | st In. | |
| | | own or have any legal or equitable inte | erest in any farm- or | commercial fishin | g-related property? | |
| | No. | Go to Part 7. | | | | |
| I | ☐ Yes | Go to line 47. | | | | |
| Part 1 | 7: | Describe All Property You Own or Have an | Interest in That You D | id Not List Above | | |
| | Examp No | have other property of any kind you die les: Season tickets, country club members | | | | |
| Ц | l Yes. | Give specific information | | | | |
| 54. | Add t | he dollar value of all of your entries fror | n Part 7. Write that | number here | | \$0.00 |
| Part 8 | 8: | List the Totals of Each Part of this Form | | | | |
| 55. | Part 1 | : Total real estate, line 2 | | | | \$0.00 |
| | | : Total vehicles, line 5 | | \$15,000.00 | | ΨΟ.ΟΟ |
| | | : Total personal and household items, I | | \$1,550.00 | | |
| | | : Total financial assets, line 36 | | \$3,720.00 | | |
| | | : Total manetal assets, line so | 15 | \$0.00 | | |
| | | : Total farm- and fishing-related proper | _ | \$0.00 | | |
| 61. | | : Total other property not listed, line 54 | _ | \$0.00 | | |
| 62. | Total | personal property. Add lines 56 through | 61 | \$20,270.00 | Copy personal property t | otal \$20,270.00 |
| 63. | Total | of all property on Schedule A/B. Add line | e 55 + line 62 | | | \$20,270.00 |

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Official Form 106A/B Schedule A/B: Property page 5

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| | | Doddino | 1 440 10 0100 | |
|---------------------|--------------------------|-------------------|---------------|-------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Alicia Dodson | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | | ount of the exemption you claim | Specific laws that allow exemption |
|--|---|---|---|------------------------------------|
| 2014 Nissan Sentra 41000 miles car | \$15,000.00 | - | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Misc used household goods nothing expensive, unique; | \$1,250.00 | | \$950.00 | 735 ILCS 5/12-1001(b) |
| no furniture purchased within the last two years Line from <i>Schedule A/B</i> : 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| used clothing Line from Schedule A/B: 11.1 | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(a) |
| Line IIoiii Schedule AVD. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Cash-\$2000 Line from Schedule A/B: 16.1 | \$2,000.00 | | \$2,000.00 | 735 ILCS 5/12-1001(b) |
| Line from Generalie AVB. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Savings account with Bank of America Line from Schedule A/B: 17.2 | \$1,700.00 | | \$1,050.00 | 735 ILCS 5/12-1001(b) |
| Line from <i>Schedule A/B</i> : 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |

Entered 09/13/17 11:25:34 Case 17-27353 Doc 1 Filed 09/13/17 Desc Main Page 16 of 56 Document Debtor 1 Alicia Dodson Case number (if known) Brief description of the property and line on Schedule A/B that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B 401k 735 ILCS 5/12-1006 Unknown 100% Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit .)

| | | | • |
|----|------|--|---------------------|
| 3. | | u claiming a homestead exemption of more than \$160,375? t to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the | date of adjustment |
| | No | | |
| | Yes. | ss. Did you acquire the property covered by the exemption within 1,215 days before y | ou filed this case? |
| | | No | |
| | | Yes | |

| | Cas | se 17-27353 | Doc 1 | Filed 09/13/17 Document | Entered Page 17 | d 09/13/17 11: of 56 | 25:34 | Desc M | 1ain |
|--------------------------------------|--|--------------------------|--|---|--------------------|--|-----------------------------|----------|--------------------------|
| Filli | n this informa | ation to identify you | ır case: | | | | | | |
| Deb | tor 1 | Alicia Dodson | | | | | | | |
| | | First Name | Mi | ddle Name | Last Name | | | | |
| Deb (Spou | tor 2 se if, filing) | First Name | Mi | ddle Name | Last Name | | | | |
| Unit | ed States Banl | kruptcy Court for the | NORTH | HERN DISTRICT OF ILL | INOIS | | | | |
| Case (if kno | e number | | | | | | | _ | if this is an |
| Offi | cial Form | 106D | | | | | | | |
| Sc | hedule [| D: Creditors | Who I | Have Claims : | Secured | by Propert | y | | 12/15 |
| numb I. Do | er (if known). any creditors h No. Check t Yes. Fill in a | ave claims secured by | y your prope his form to t | the entries, and attach it ferty? the court with your other | | | | · | ine and case |
| | | laims. If a creditor has | more than on | e secured claim, list the cre- | ditor senarately | Column A | Column B | | Column C |
| for ea | ach claim. If mo | re than one creditor has | s a particular claim, list the other creditors in Part 2. ical order according to the creditor's name. | | s in Part 2. As | Amount of claim Do not deduct the value of collateral. | Value of of that supp claim | | Unsecured portion If any |
| 2.1 | Nissan Mot | or Acceptanc | Describe t | he property that secures t | he claim: | \$14,295.00 | \$1 | 5,000.00 | \$0.00 |
| | Po Box 660 | 360 | car | ssan Sentra 41000 mil | | | | | |
| | Dallas, TX | 75266 | Conting | gent | | | | | |
| | Number, Street, 0 | City, State & Zip Code | ☐ Unliquid | dated | | | | | |
| Who | owes the deb | t? Check one. | ☐ Dispute Nature of | ed lien. Check all that apply. | | | | | |
| | ebtor 1 only | | _ | eement you made (such as r | mortgage or secu | ured | | | |
| | ebtor 2 only | | car loa | ın) | | | | | |
| | ebtor 1 and Deb | otor 2 only | ☐ Statuto | ry lien (such as tax lien, med | chanic's lien) | | | | |
| ПА | t least one of the | e debtors and another | ☐ Judgme | ent lien from a lawsuit | | | | | |
| ☐ Check if this claim relates to a ☐ | | | | including a right to offset) | | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here: \$14,295.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$14,295.00

Last 4 digits of account number

Part 2: List Others to Be Notified for a Debt That You Already Listed

Opened 09/14 Last Active

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

0001

community debt

Date debt was incurred 8/22/17

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Document Page 18 of 56 Fill in this information to identify your case: Debtor 1 Alicia Dodson Middle Name Last Name First Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Allied Interestate Unknown Last 4 digits of account number 5544 Nonpriority Creditor's Name PO Box 1954 When was the debt incurred? 2017 Southgate, MI 48195 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify collection

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| Debtor ' | 1 Alicia Dodson | | Case number (if know) | |
|----------|--|--|--|------------|
| | Bank Of America | Last 4 digits of account number | 1740 | \$541.00 |
| | Nonpriority Creditor's Name Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410 | When was the debt incurred? | Opened 01/17 Last Active 4/18/17 | |
| _ | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | |
| | ☐ At least one of the debtors and another ☐ Check if this claim is for a community | Type of NONPRIORITY unsecured ☐ Student loans | d claim: | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | | |
| | Barclays Bank Delaware Nonpriority Creditor's Name | Last 4 digits of account number | 5527 | \$1,760.00 |
| | 100 S West St Wilmington, DE 19801 | When was the debt incurred? | Opened 07/14 Last Active 4/27/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | | |
| | Baxter Credit Union Nonpriority Creditor's Name | Last 4 digits of account number | 9232 | \$1,180.00 |
| | 340 N Milwaukee Avenue Vernon Hills, IL 60061 | When was the debt incurred? | Opened 09/10 Last Active 8/13/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | | |
| | Yes | ■ Other. Specify Credit Card | | |

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Debtor 1 Alicia Dodson Case number (if know) 4.5 Baxter Ecu/BCU Last 4 digits of account number 0102 \$3,807.00 Nonpriority Creditor's Name 340 N Milwaukee Ave. Opened 08/15 Last Active When was the debt incurred? Attn: Bankruptcv 8/25/17 Vernon Hills, IL 60061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other. Specify 4.6 Baxter Ecu/BCU Last 4 digits of account number 0100 \$0.00 Nonpriority Creditor's Name 340 N Milwaukee Ave. Opened 03/10 Last Active Attn: Bankruptcy When was the debt incurred? 5/24/13 Vernon Hills, IL 60061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Automobile Other. Specify 4.7 Baxter Ecu/BCU Last 4 digits of account number \$0.00 0101 Nonpriority Creditor's Name 340 N Milwaukee Ave. Opened 06/14 Last Active Attn: Bankruptcy When was the debt incurred? 12/01/14 Vernon Hills, IL 60061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacktriangledown Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Unsecured

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| Alicia Douson | | Case Hulliber (II know) | | | |
|--|--|---|---|--|--|
| Baxter Ecu/BCU | Last 4 digits of account number | 0700 | | \$0.00 | |
| Nonpriority Creditor's Name 340 N Milwaukee Ave. Attn: Bankruptcy Vernon Hills, IL 60061 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim i | 2/06/14 | Active | | |
| Who incurred the debt? Check one. | | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce the | nat you did not | | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar deb | ots | | |
| Yes | Other. Specify Unsecured | | | | |
| Capital One | Last 4 digits of account number | 9404 | | \$3,574.00 | |
| Attn: Bankruptcy Po Box 30253 | When was the debt incurred? | Opened 02/11 Last A 5/04/17 | Active | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar deb | its | | |
| Yes | Other. Specify Credit Card | | | | |
| Capital One | Last 4 digits of account number | 8032 | | \$1,669.00 | |
| Attn: Bankruptcy Po Box 30253 | When was the debt incurred? | Opened 07/14 Last A 5/04/17 | ctive | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | |
| Who incurred the debt? Check one. | | | | | |
| Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| ☐ Check if this claim is for a community | Student loans | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce the | nat you did not | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar deb | its | | |
| ☐ Yes | ■ Other. Specify Credit Card | | | | |
| | Baxter Ecu/BCU Nonpriority Creditor's Name 340 N Milwaukee Ave. Attn: Bankruptcy Vernon Hills, IL 60061 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Check if this claim is for a community debt Is the claim subject to offset? | Baxter Ecu/BCU Nonpriority Creditor's Name 340 N Milwaukee Ave. Attn: Bankruptcy Vernon Hills, IL 600061 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 or 2 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 or 2 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 or 2 only Debtor 9 | Baxter Ecu/BCU Nonpriority Creditor's Name 340 N Milwaukee Ave. Attn: Bankruptcy Vernon Hills, IL 60061 Nonpriority Creditor's Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Attential Bankruptcy Vers Capital One Nonpriority Creditor's Name Attn: Bankruptcy Debtor 2 only Debtor 1 and Debtor 2 only Capital One Nonpriority Creditor's Name Attn: Bankruptcy Debtor 3 and Code Who incurred the debt? Check one. Debtor 4 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Capital One Nonpriority Creditor's Name Attn: Bankruptcy Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Capital One Nonpriority Creditor's Name Attn: Bankruptcy Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply When was the debt incurred? Opened 02/11 Last Afforts the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? Opened 02/11 Last Afforts the claim is: Check all that apply When was the debt incurred? Suddent loans Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 only Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 only | Baxter Ecu/BCU Nonprotrity Creditor's Name 340 N Milwaukee Ave. Attr. Bankruptcy Vernon Hills, IL 60061 Number Street City State 2/p Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Nonprotrity Creditor's Name Attr. Bankruptcy Capital One Nonprotrity Creditor's Name Attr. Bankruptcy Number Street City State 2/p Code Who incurred the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 and Debtor 2 only Capital One Nonprotrity Creditor's Name Attr. Bankruptcy No Do X30253 Salt Lake City, UT 84130 No Debtor 1 and Debtor 2 only Attr. Bankruptcy Po Bo X30253 Salt Lake City, UT 84130 Number Street City State 2/p Code Who incurred the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Capital One Nonprotrity Creditor's Name Attr. Bankruptcy Po Bo X30253 Salt Lake City, UT 84130 Number Street City State 2/p Code Who incurred the debtors and another Check if this claim is for a community debt the claim subject to offset? Debtor 1 and Debtor 2 only Debto | |

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Case number (if know)

| Denioi | Alicia Douson | | Case Humber (II know) | |
|--------|--|--|--|------------------|
| 4.1 | Capital One | Last 4 digits of account number | 0280 | \$575.00 |
| _ | Nonpriority Creditor's Name Attn: General Correspondence/Bankruptcy Po Box 30285 | When was the debt incurred? | Opened 11/15 Last Active 3/23/17 | |
| | Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit Card | | |
| 4.1 | Capital One | Last 4 digits of account number | 8408 | \$0.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 5/21/13 Last Active 6/20/13 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | Labelia | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharir | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | | |
| 4.1 | Oith and Neath Assessing | | 0005 | Ф Г 44 00 |
| 3 | Citibank North America Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 | Last 4 digits of account number When was the debt incurred? | 9825 Opened 05/13 Last Active 3/23/17 | \$511.00 |
| | Saint Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | | |
| | Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separate as priority claims | | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharir | a plans, and other similar debts | |
| | | | g plans, and other similar depts | |
| | Yes | Other. Specify Credit Card | | |

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| Depto | Alicia Dodson | | Case number (if know) | | |
|----------|--|--|---|------------|--|
| 4.1 | Citicards Cbna | Last 4 digits of account number | 2974 | \$637.00 | |
| | Nonpriority Creditor's Name Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179 | When was the debt incurred? | Opened 12/15 Last Active 5/04/17 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | ☐ Yes | ■ Other. Specify Credit Card | | | |
| 4.1 5 | Comenity Bank/Gordmans | Last 4 digits of account number | 1810 | \$2,077.00 | |
| | Nonpriority Creditor's Name Comenity Bank Po Box 182125 | When was the debt incurred? | Opened 08/12 Last Active 4/27/17 | | |
| | Columbus, OH 43218 Number Street City State Zlp Code Who incurred the debt? Check one. | Street City State Zlp Code As of the date you file, the claim is: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify Charge Acc | ount | | |
| 4.1 6 | Comenity Bank/Torrid Nonpriority Creditor's Name | Last 4 digits of account number | 5953 | \$1,820.00 | |
| | Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 | When was the debt incurred? | Opened 10/13 Last Active 5/12/17 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | ☐ Yes | ■ Other Specify Charge Acc | ount | | |
| | | | | | |

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| Dept | or 1 Alicia Dodson | | Case number (if know) | |
|----------|---|--|---|------------|
| 4.1 7 | Comenity Bank/Victoria Secret | Last 4 digits of account number | 8679 | \$3,334.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 | When was the debt incurred? | Opened 06/13 Last Active 5/04/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | ☐ Debts to pension or profit-sharin | | |
| | Yes | Other. Specify Charge Acc | ount | |
| 4.1 8 | Credit First National Assoc Nonpriority Creditor's Name | Last 4 digits of account number | 4689 | \$732.00 |
| | Attn: BK Credit Operations | | Opened 02/12 Last Active | |
| | Po Box 81315 | When was the debt incurred? | 5/12/17 | |
| | Cleveland, OH 44181 Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | |
| | Who incurred the debt? Check one. | 710 of the date you me, the claim. | o. Oncok all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? ■ No | report as priority claims Debts to pension or profit-sharin | a plane, and other similar debts | |
| | | | | |
| | Yes | Other. Specify Charge Acc | OUTIL | |
| 4.1 9 | Credit One Bank Na Nonpriority Creditor's Name | Last 4 digits of account number | 2198 | \$818.00 |
| | • • | | Opened 07/16 Last Active | |
| | Po Box 98873 Las Vegas, NV 89193 | When was the debt incurred? | 5/19/17 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ■ No | · | g p , and onto | |
| | □ res | Other. Specify Credit Card | | |

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| Deptoi | Alicia Dousoii | | Case Humber (II know) | |
|--------|--|--|---|----------|
| 4.2 | Genesis Bankcard Srvs | Last 4 digits of account number | 5111 | \$456.00 |
| | Nonpriority Creditor's Name 15220 Nw Greenbrier Pkwy Ste 200 Beaverton, OR 97006 | When was the debt incurred? | Opened 07/16 Last Active 5/19/17 | - |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharir | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit Card | | - |
| 4.2 | Great American Finance Nonpriority Creditor's Name | Last 4 digits of account number | 7985 | \$0.00 |
| | Attn: Bankruptcy 20 N Wacker Dr. Suite 2275 Chicago, IL 60606 | When was the debt incurred? | Opened 05/13 Last Active 12/19/13 | - |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sens | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | nation agreement of divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Household | Goods | _ |
| 4.2 | Harris & Harris Nonpriority Creditor's Name | Last 4 digits of account number | 3035 | \$137.00 |
| | 111 W Jackson Blvd Suite 400 | When was the debt incurred? | Opened 8/08/12 | - |
| | Chicago, IL 60604 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | | |
| | No | Debts to pension or profit-sharir | og plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Medical | <u> </u> | |
| | . 00 | - Outer, Specify Modrodi | | _ |

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| Debt | tor 1 Alicia Dodson | | Case number (if know) | | | |
|----------|---|--|--|----------|--|--|
| 4.2 3 | Harris & Harris | Last 4 digits of account number | 2014 | \$100.00 | | |
| | Nonpriority Creditor's Name 111 W Jackson Blvd Suite 400 | When was the debt incurred? | Opened 2/19/16 | | | |
| | Chicago, IL 60604 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | ☐ Yes | Other. Specify Medical | | | | |
| 4.2 4 | Harris & Harris | Last 4 digits of account number | 3029 | \$81.00 | | |
| | Nonpriority Creditor's Name 111 W Jackson Blvd Suite 400 | When was the debt incurred? | Opened 8/08/12 | | | |
| | Chicago, IL 60604 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | As of the date you me, the olding | S. Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | ☐ Yes | Other. Specify Medical | | | | |
| 4.2 5 | Harris & Harris Nonpriority Creditor's Name | Last 4 digits of account number | 3032 | \$67.00 | | |
| | 111 W Jackson Blvd Suite 400 | When was the debt incurred? | Opened 8/08/12 | | | |
| | Chicago, IL 60604 Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | | |
| | Who incurred the debt? Check one. | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | Contingent | | | | |
| | Debtor 2 only | Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | Disputed | | | | |
| | At least one of the debtors and another | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | |
| | No | Debts to pension or profit-sharir | o plans, and other similar debts | | | |
| | ■ No □ Yes | · | g plane, and other official doubts | | | |
| | ⊔ Yes | Other. Specify Medical | | | | |

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| Alicia Douson | | Case Humber (II know) | | | | | | |
|---|--|--|--|--|--|--|---|--|
| Harris & Harris | Last 4 digits of account number | 7521 | \$67.00 | | | | | |
| Nonpriority Creditor's Name 111 W Jackson Blvd Suite 400 | When was the debt incurred? | Opened 5/30/12 | | | | | | |
| Chicago, IL 60604 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| Yes | Other. Specify Medical | | | | | | | |
| Nissan Motor Acceptance Corp/Infinity Lt | Last 4 digits of account number | 6363 | \$0.00 | | | | | |
| Attn: Bankruptcy Po Box 660360 | When was the debt incurred? | Opened 05/13 Last Active 10/01/14 | | | | | | |
| Dallas, TX 75266 Number Street City State Zlp Code Who incurred the debt? Check one. | s: Check all that apply | | | | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | | | |
| | ☐ Unliquidated ☐ Disputed | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | |
| debt Is the claim subject to offset? | | | | | | | | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| Yes | ■ Other. Specify Lease | | | | | | | |
| Personal Finance | Last 4 digits of account number | 4201 | \$0.00 | | | | | |
| 1151 S Lee St | When was the debt incurred? | Opened 07/15 Last Active 2/12/16 | | | | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | | |
| □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed | | | | | | | | |
| | | | | | | | ☐ At least one of the debtors and another | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | |
| ■ No | · | - • | | | | | | |
| Yes | ■ Other. Specify Household Goods Secured | | | | | | | |
| | Harris & Harris Nonpriority Creditor's Name 111 W Jackson Blvd Suite 400 Chicago, IL 60604 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Nissan Motor Acceptance Corp/Infinity Lt Nonpriority Creditor's Name Attn: Bankruptcy Po Box 660360 Dallas, TX 75266 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Personal Finance Nonpriority Creditor's Name 1151 S Lee St Des Plaines, IL 60016 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Harris & Harris Nonpriority Creditor's Name 111 W Jackson Blvd Suite 400 Chicago, IL 60604 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt In No Hospitor Creditor's Name Attn: Bankruptcy Po Box 660360 Dallas, TX 75266 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonpriority Creditor's Name 1151 S Lee St Des Plaines, IL 60016 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 onlo Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 onlo Debtor 2 only Debtor 4 onlo Debtor 2 only Debtor 1 onlo Debtor 2 only Debtor 2 only Debtor 1 onlo Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 onlo Debtor 2 only Debtor 4 of the debtors and another Debtor 4 of the debtors and another Debtor 5 of the debtors and another Debtor 6 of the debtors and an | Harris & Harris Nosprointy Creditor's Name 111 W Jackson Blvd Suite 400 Chicago, IL 60604 Who incurred the debt? Check one. Debtor 1 and Debtor 2 conly Check if this claim is for a community debt Is the claim subject to offset? Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Personal Finance Nosprointy Creditor's Name 11 W Jackson Blvd When was the debt incurred? Men was the debt incurred? Opened 5/30/12 When was the debt incurred? Opened 5/30/12 When was the debt incurred? Opened 5/30/12 When was the debt incurred? Opened 5/30/12 Student bans Constingent Check if this claim is for a community debt Is the claim subject to offset? In No Consingent Constingent Constination Constingent Constination Constingent Const | | | | | |

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Case number (if know)

| Debtor | 1 Alicia Dodson | —————————————————————————————————————— | Case number (if know) | | | | | |
|--------|--|--|--|------------|--|--|--|--|
| 4.2 | Personal Finance | Last 4 digits of account number | 2501 | \$0.00 | | | | |
| | Nonpriority Creditor's Name 1151 S Lee St Des Plaines, IL 60016 | When was the debt incurred? | Opened 11/14 Last Active 2/05/15 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Unsecured | | | | | | |
| 4.3 | Santander Consumer USA Nonpriority Creditor's Name | Last 4 digits of account number | 1000 | \$0.00 | | | | |
| | Po Box 961245 Ft Worth, TX 76161 | When was the debt incurred? | Opened 11/14 Last Active 8/26/15 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Automobile | | | | | | |
| 4.3 | Syncb/hhgreg Nonpriority Creditor's Name | Last 4 digits of account number | 5933 | \$1,875.00 | | | | |
| | Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 | When was the debt incurred? | Opened 04/13 Last Active 4/28/17 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | ☐ Yes | ■ Other. Specify Charge Account | | | | | | |

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| Dept | or 1 Alicia Dodson | | Case number (if know) | | | | | |
|----------|---|--|--|------------|--|--|--|--|
| 4.3 2 | Synchrony Bank | Last 4 digits of account number | 9094 | \$983.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 | When was the debt incurred? | Opened 02/17 Last Active 5/19/17 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | ☐ Yes | ■ Other. Specify Charge Acc | | | | | | |
| | La res | Other. Specify Orlange Acc | Ourit | | | | | |
| 4.3 | Synchrony Bank/ Old Navy Nonpriority Creditor's Name | Last 4 digits of account number | 1891 | \$2,118.00 | | | | |
| | Attn: Bankruptcy Po Box 965060 | When was the debt incurred? | Opened 06/11 Last Active 5/05/17 | | | | | |
| | Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one. | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Charge Acc | ount | | | | | |
| 4.3 | Synchrony Bank/Walmart | Last 4 digits of account number | 2784 | \$2,969.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 | When was the debt incurred? | Opened 03/12 Last Active 4/28/17 | | | | | |
| | Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | | | | | | | |
| | ☐ At least one of the debtors and another | _ ' | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | ☐ Yes | Other. Specify Charge Acc | ount | | | | | |
| | | | | | | | | |

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| Depto | Alicia Dodson | | Case number (if know) | | | | | | |
|----------|---|---|--|-------------|--|--|--|--|--|
| 4.3 5 | Target | Last 4 digits of account number | 7310 | \$2,579.00 | | | | | |
| | Nonpriority Creditor's Name C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440 | When was the debt incurred? | Opened 11/13 Last Active 5/19/17 | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | | | |
| | Debtor 1 only | Contingent | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | | | | | |
| | At least one of the debtors and another | ☐ Student loans | a Glaini. | | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | | |
| | □Yes | ■ Other Specify Credit Card | | | | | | | |
| 4.3 | Us Dept Of Ed/Great Lakes Higher Educati | Last 4 digits of account number | 8581 | \$36,559.00 | | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy 2401 International Lane Madison, WI 53704 | When was the debt incurred? | Opened 07/14 Last Active 8/31/17 | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | | |
| | Yes | Other. Specify | | | | | | | |
| | | Educational | | | | | | | |
| 4.3 7 | Visa Dept Store National Bank/Macy's Nonpriority Creditor's Name | Last 4 digits of account number | 7250 | \$1,174.00 | | | | | |
| | Attn: Bankruptcy Po Box 8053 Mason, OH 45040 | When was the debt incurred? | Opened 01/14 Last Active 5/12/17 | | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | | |
| | | | | | | | | | |
| | ☐ Yes | ■ Other. Specify Charge Account | | | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Alicia Dodson

Case number (if know)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | - | Total Claim |
|--------------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total | | | | | |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ | 36,559.00 |
| claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 35,641.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 72,200.00 |

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| | | DUCUITIC | IIL FAU C 32 UI 30 |
|---|--------------------------|-------------------|-------------------------------|
| Fill in this infor | rmation to identify your | case: | |
| Debtor 1 | Alicia Dodson | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS |
| Case number | | | |
| (if known) | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company witl | h whom you have the o | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-----------------------|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | · | · | • | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| | | | | | |

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| | | Docume | ent Page 33 d | of 56 |
|---------------------------|--|---|---------------------------|--|
| Fill in this | information to identify your | case: | | |
| Debtor 1 | Alicia Dodson | | | |
| 20210 | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filin | ng) First Name | Middle Name | Last Name | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case numb | hor | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Official | l Form 106H | | | |
| | | - l- 1 - u - | | |
| <u>Scnea</u> | lule H: Your Cod | eptors | | 12/15 |
| _ ` | you have any codebtors? (If | you are filing a joint case, | do not list either spouse | e as a codebtor. |
| ■ No □ Yes | S | | | |
| Arizona No. | hin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spo | , Nevada, New Mexico, Pu | erto Rico, Texas, Wash | ry? (Community property states and territories include nington, and Wisconsin.) |
| in line Form out Co | 2 again as a codebtor only | f that person is a guaran Form 106E/F), or Sched | tor or cosigner. Make | r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 06G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| | | | | |
| 3.1 | N | | | Schedule D, line |
| | Name | | | Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | Number Street | | | _ |
| (| City | State | ZIP Code | |
| 3.2 | | | | □ Schodulo D. lino |
| | Name | | | □ Schedule D, line □ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| _ | | | | |
| | Number Street City | State | ZIP Code | |
| ' | Oity | Giale | Zir Coue | |

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| Fill | in this information to identify your c | ase: | | | | | | | |
|----------------------------|---|--|--|--------------------|----------------|--|----------------------|--|-----------------|
| Del | otor 1 Alicia Dodso | n | | | _ | | | | |
| | otor 2 ouse, if filing) | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | T OF ILLINOIS | | _ | | | | |
| (If kr | se number | | | | | | d filing ent show | ving postpetition e following date: | |
| | fficial Form 106l | | | | | MM / DD/ Y | YYY | | |
| Be a sup spo atta | chedule I: Your Incomes complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment | sible. If two married peo are married and not filir ir spouse is not filing wi | ng jointly, and your the thick the t | spouse de infor | is liv mati | ing with you, inclu on about your spo | ude info | ormation about more space is | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non | n-filing spouse | |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | ■ Employed □ Not employed | | | ☐ Emplo | • | d | |
| | Include part-time, seasonal, or self-employed work. | Occupation Employer's name | Administrative As | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | Three Corporate Lake Zurich, IL 6 | | | | | | |
| | | How long employed the | nere? 5 years | | | | | | |
| Par | Give Details About Mor | nthly Income | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If y | you have nothing to re | eport for | any | line, write \$0 in the | space. | Include your nor | n-filing |
| | ou or your non-filing spouse have more space, attach a separate sheet to | | ombine the informatio | n for all e | empl | oyers for that perso | n on the | e lines below. If y | you need |
| | | | | | | For Debtor 1 | | Debtor 2 or filing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 4,246.67 | \$ | N/A | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$_ | N/A | |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | 4. | \$ | 4,246.67 | \$ | N/A | |

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| Deb | tor 1 | Alicia Dodson | - | Ca | se number (<i>if kn</i> | own) | | | | |
|-----|---|--|-----------|------|--------------------------|------|-----------|-------------|------------|----------|
| | | | | F | or Debtor 1 | | For | Debtor 2 | or | |
| | _ | | | _ | | | | -filing spo | | |
| | Cop | y line 4 here | 4. | \$ | 4,246 | .67 | \$ | | N/A | |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 849 | .33 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | | .00 | \$ | | N/A | • |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 169 | .00 | \$ | | N/A | • |
| | 5d. | Required repayments of retirement fund loans | 5d. | | 0 | .00 | \$ | | N/A | |
| | 5e. | Insurance | 5e. | \$ | 260 | | \$_ | | N/A | - |
| | 5f. | Domestic support obligations | 5f. | \$ | | .00 | \$_ \$ | | N/A | = |
| | 5g. 5h. | Union dues Other deductions. Specify: | 5g. 5h | | | .00 | · · — | | N/A N/A | - |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 1,278 | | \$ | | N/A | - |
| | | | | | | | · — | | | - |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 2,968 | .34 | \$ | | N/A | - |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | |
| | | monthly net income. | 8a. | \$ | 0 | .00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ | | .00 | \$ | | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | | | | | _ | | | - |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0 | .00 | \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d. | * | | .00 | \$_ | | N/A | |
| | 8e. | Social Security | 8e. | \$ | | .00 | \$ | | N/A | - |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | \$ | 0 | .00 | \$ | | N/A | |
| | 8g. | Pension or retirement income | 8g. | \$ | | .00 | \$ | | N/A | |
| | 8h. | Other monthly income. Specify: | 8h | + \$ | 0 | .00 | + \$ | | N/A | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | C | .00 | \$ | | N/A | <u>\</u> |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | S | 2,968.34 | + \$ | | N/A = | \$_ | 2,968.34 |
| 11. | Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 | | | | | | | | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes | | | | | | 12. | ombir | 2,968.34 |
| | | | | | | | | | | y income |
| 13. | Do y ■ | vou expect an increase or decrease within the year after you file this form No. Yes. Explain: | ? | | | | | | | |

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| Fill | in this informa | tion to identify yo | our case: | | | l | | | |
|------|---------------------------|--|---------------|---|--|-------------|---------------------|-------------------------|---|
| Deb | tor 1 | Alicia Dodsor | 1 | | | Ch | eck if thi An an | is is: nended filing | |
| | tor 2 ouse, if filing) | | | | | | | | ring postpetition chapter the following date: |
| `` | , 0, | | | | | | | | uniowing date. |
| Unit | ed States Bankr | uptcy Court for the: | NORTH | IERN DISTRICT OF ILLIN | OIS | | MM / | DD / YYYY | |
| 1 | e number nown) | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | |
| | | J: Your I | | | | | | | 12/1 |
| info | ormation. If m | | eded, atta | . If two married people ar ch another sheet to this n. | | | | | |
| Par | | ibe Your House | hold | | | | | | |
| 1. | Is this a join | | | | | | | | |
| | ■ No. Go to | | n a sonar | ate household? | | | | | |
| | □ res. Doe | | ii a sepai | ate flousefloid: | | | | | |
| | | | t file Offici | al Form 106J-2, Expenses | s for Separate House | ehold of De | ebtor 2. | | |
| 2. | Do you have | e dependents? | □ No | | | | | | |
| | Do not list De Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | De ag | ependent's le | Does dependent live with you? |
| | Do not state dependents | | | | Son | | 17 | 7 | □ No ■ Yes |
| | | | | | Daughter | | 17 | 7 | □ No ■ Yes |
| | | | | | | | | | □ No □ Yes |
| | | | | | | | | | □ No |
| 2 | Da | | | | | | | | ☐ Yes |
| 3. | expenses of | enses include f people other tl d your depende | han ┌ | No Yes | | | | | |
| exp | imate your ex | | our bankrı | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | | |
| the | | n assistance and | | government assistance i cluded it on <i>Schedule I:</i> \ | | | | Your expe | enses |
| • | | • | | | | | | | |
| 4. | | r home owners ad any rent for the | | ses for your residence. I r lot. | nclude first mortgag | e 4. | \$ | | 800.00 |
| | If not includ | ed in line 4: | | | | | | | |
| | 4a. Real e | state taxes | | | | 4a. | \$ | | 0.00 |
| | | rty, homeowner's | | | | 4b. | : | | 0.00 |
| | | | | ipkeep expenses | | 4c. | · | | 100.00 |
| 5 | | owner's associat | | dominium dues our residence, such as ho | me equity loans | 4d. | \$ \$ | | 0.00 |

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| Deb | otor 1 | Alicia Do | dson | Case | num | ber (if known) | |
|-----|---------|--|---|-----------------------------|------|----------------|-----------------------------|
| 6. | Utiliti | ies: | | | | | |
| 0. | 6a. | | heat, natural gas | | 6a. | \$ | 185.00 |
| | 6b. | - | ver, garbage collection | | 6b. | \$ | 120.00 |
| | 6c. | | e, cell phone, Internet, satellite, and cable serv | vices | 6c. | \$ | 150.00 |
| | 6d. | Other. Spe | • | | 6d. | | 0.00 |
| 7. | Food | • | ekeeping supplies | | 7. | \$ | 650.00 |
| 8. | | | hildren's education costs | | 8. | \$ | 25.00 |
| 9. | Cloth | ning, laund | ry, and dry cleaning | | 9. | \$ | 100.00 |
| 10. | | - | roducts and services | | 10. | \$ | 65.00 |
| | | | ntal expenses | | 11. | · · | 180.00 |
| 12. | Trans | sportation. | Include gas, maintenance, bus or train fare. | | | | |
| | | | ar payments. | | 12. | \$ | 395.00 |
| 13. | Enter | rtainment, | clubs, recreation, newspapers, magazines | , and books | 13. | \$ | 75.00 |
| 14. | Chari | itable cont | ributions and religious donations | | 14. | \$ | 0.00 |
| 15. | Insur | | | | | | |
| | | | surance deducted from your pay or included | | | | |
| | | Life insura | | | 5a. | | 0.00 |
| | 15b. | Health ins | urance | 1 | 5b. | \$ | 0.00 |
| | 15c. | Vehicle ins | surance | 1 | 15c. | \$ | 100.00 |
| | 15d. | Other insu | rance. Specify: | 1 | 5d. | \$ | 0.00 |
| 16. | | | clude taxes deducted from your pay or includ | ed in lines 4 or 20. | | _ | |
| | Speci | • | | | 16. | \$ | 0.00 |
| 17. | | | ease payments: | | _ | • | 222.22 |
| | | | ents for Vehicle 1 | | 7a. | · | 362.00 |
| | | | ents for Vehicle 2 | | 7b. | * | 0.00 |
| | | Other. Spe | - | | 17c. | · | 0.00 |
| | | Other. Spe | | | 7d. | \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support tha | | 18. | \$ | 0.00 |
| 10 | | | your pay on line 5, <i>Schedule I, Your Incom</i> s you make to support others who do not li | | | <u> </u> | 0.00 |
| 10. | Speci | | you make to support others who do not h | ve waa you. | 19. | Ψ | 0.00 |
| 20 | • | | erty expenses not included in lines 4 or 5 of | of this form or on Schedule | | our Income | |
| 20. | | | s on other property | | 20a. | | 0.00 |
| | | Real estat | | | 20b. | · | 0.00 |
| | | | nomeowner's, or renter's insurance | | 20c. | · | 0.00 |
| | | | ice, repair, and upkeep expenses | | 20d. | | 0.00 |
| | | | er's association or condominium dues | | 20e. | · | 0.00 |
| 21 | | r: Specify: | or a decodiation of condominant duce | | 21. | · | 0.00 |
| ۷., | Othic | . Opcony. | | | 21. | ΙΨ | 0.00 |
| 22. | | | monthly expenses | | | | |
| | | | through 21. | | | \$ | 3,307.00 |
| | 22b. (| Copy line 22 | 2 (monthly expenses for Debtor 2), if any, fror | n Official Form 106J-2 | | \$ | |
| | 22c. / | Add line 22a | a and 22b. The result is your monthly expens | es. | | \$ | 3,307.00 |
| 00 | 0 | | | | | | · |
| 23. | | - | nonthly net income. | odulo I | 22~ | ¢ | 0.000.04 |
| | | | 12 (your combined monthly income) from Sch | | 23a. | · | 2,968.34 |
| | 23b. | 23b. Copy your monthly expenses from line 22c above. | | | 23b. | - \$ | 3,307.00 |
| | 230 | Subtract v | our monthly expenses from your monthly inco | mo | | | |
| | 230. | | our monthly expenses from your monthly inco is your monthly net income. | 111 0 . | 23c. | \$ | -338.66 |
| | | THE TESUIT | to you. Monday not moome. | | | <u> </u> | |
| 24. | | | an increase or decrease in your expenses | | | | |
| | For ex | kample, do yo | ou expect to finish paying for your car loan within the | | | | se or decrease because of a |
| | | | terms of your mortgage? | | | | |
| | ■ No | | | | | | |
| | ☐ Ye | es. | Explain here: | | | | |

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| Fill in t | his inforr | mation to identify your | case: | | | | |
|---------------------|------------|---|-------------------------|--------------|--------------------|--------------------|--|
| Debtor | 1 | Alicia Dodson | | | | | |
| | _ | First Name | Middle Name | La | ist Name | | |
| Debtor (Spouse i | _ | First Name | Middle Name | La | ist Name | | |
| ` ' | | | | | | | |
| United | States Ba | inkruptcy Court for the: | NORTHERN DISTRIC | CI OF ILLING |)IS | | |
| Case n | umber | | | | | | |
| (if known) | _ | | | | | | ☐ Check if this is an |
| | | | | | | | amended filing |
| | | | | | | | |
| Ott:~: | al Farm | n 100Dee | | | | | |
| | | n 106Dec | | | | | |
| Dec | larat | ion About a | an Individua | ıl Debt | or's Sch | edules | 12/15 |
| obtainir | ng money | | n connection with a ba | | | | tement, concealing property, or 000, or imprisonment for up to 20 |
| | Sigr | n Below | | | | | |
| Di | d you pa | y or agree to pay some | eone who is NOT an att | orney to hel | p you fill out ban | kruptcy forms? | |
| | l No | | | | | | |
| | Yes. N | Name of person | | | | Attach Bai | nkruptcy Petition Preparer's Notice, |
| | | | | | | Declaratio | n, and Signature (Official Form 119) |
| | | | | | | | |
| | | Ity of perjury, I declare true and correct. | that I have read the su | mmary and | schedules filed w | vith this declarat | ion and |
| v | /o/ Alioi | a Dadaan | | v | | | |
| X | Alicia D | a Dodson Oodson | | X | Signature of De | ebtor 2 | |
| | | re of Debtor 1 | | | Jigilalaro or Do | | |
| | J | | | | | | |
| | Date S | September 13, 2017 | | | Date | | |
| | | | | | | | |

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| - 80 | in this inform | nation to identify you | r 00001 | | | |
|----------------|---|---|--|---|--|---|
| | | nation to identify you | case. | | | |
| Deb | tor 1 | Alicia Dodson First Name | Middle Name | Last Name | | |
| | tor 2 | First Name | Middle News | Leat Name | | |
| | use if, filing) | First Name | Middle Name | Last Name | | |
| Unit | ed States Ba | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Cas (if kno | e number _ | | | | _ | theck if this is an mended filing |
| | ficial Fo | | Affairs for Individ | duals Filing for B | ankruptcy | 4/1€ |
| infor num | mation. If m | ore space is needed, n). Answer every ques | attach a separate sheet to stion. | this form. On the top of any | equally responsible for sup additional pages, write you | |
| | | | rital Status and Where You | Lived Before | | |
| 1. | What is you | r current marital statu | is? | | | |
| | ☐ Married■ Not mar | ried | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. Lis | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territory co, Texas, Washington and W | |
| | ■ No □ Yes. Ma | ike sure you fill out <i>Scl</i> | nedule H: Your Codebtors (Of | ficial Form 106H). | | |
| Part | Explai | n the Sources of You | r Income | | | |
| | Fill in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | • | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$36,295.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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| | | | | Debtor 1 | | | Debtor 2 | | |
|-----|-------------------------------|---|--|---|--|-------------|---------------------------------------|---------------------------|---|
| | | | | Sources of income Check all that apply. | Gross income (before deductions exclusions) | and | Sources of inc Check all that a | | Gross income (before deductions and exclusions) |
| | | endar year: to December | 31, 2016) | ■ Wages, commissions, bonuses, tips | \$50,22 | 9.00 | ☐ Wages, combonuses, tips | missions, | |
| | | | | ☐ Operating a business | | | ☐ Operating a | business | |
| | | endar year be to December | | ■ Wages, commissions, bonuses, tips | \$49,33 | 0.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | ☐ Operating a business | | | ☐ Operating a | business | |
| | and other winnings List each | er public benef s. If you are fili h source and t | iit payments; ng a joint cas he gross inco | per that income is taxable. Exa pensions; rental income; inter the and you have income that your the from each source separa | rest; dividends; money you received together, | collecte | ed from lawsuits; ly once under De | royalties; and btor 1. | |
| | | | | | | | | | |
| | | | | Debtor 1 | | | Debtor 2 | | |
| | | | | Sources of income Describe below. | Gross income fro each source (before deductions exclusions) | | Sources of income Describe below. | | Gross income (before deductions and exclusions) |
| Pai | rt 3: Li | ist Certain Pa | yments You | Made Before You Filed for | Bankruptcy | | | | |
| 6. | Are eith | er Debtor 1's | or Debtor 2 | 's debts primarily consume | r debts? | | | | |
| | □ No | | | ebtor 2 has primarily consupersonal, family, or househo | | er debts a | are defined in 11 | U.S.C. § 101 | 1(8) as "incurred by an |
| | | During the No. | 90 days befo | re you filed for bankruptcy, di | d you pay any creditor | r a total o | of \$6,425* or mor | re? | |
| | | □ Yes | List below e | each creditor to whom you pa editor. Do not include paymer | nts for domestic suppo | | | | |
| | | * Subject | | payments to an attorney for t on 4/01/19 and every 3 year | | iled on o | r after the date of | f adjustment. | |
| | ■ Ye | | | r both have primarily consure you filed for bankruptcy, di | | r a total o | of \$600 or more? | | |
| | | No. | Go to line 7 | | | | | | |
| | | □ _{Yes} | include pay | each creditor to whom you pai ments for domestic support o this bankruptcy case. | | | | | |
| | Credito | or's Name and | d Address | Dates of payme | | unt aid | Amount you still owe | Was this p | ayment for |

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Case number (if known) Debtor 1 Alicia Dodson

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | | |
|-----|--|------------------------------|----------------------|----------------------|----------------------------|------------------------------|--|--|
| | Yes. List all payments to an insider. | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | | |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | ments or transfer a | any property on a | ccount of a d | ebt that benefited an | | |
| | ■ No□ Yes. List all payments to an insider | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment ditor's name | | |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | ne case | | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | erty repossessed, f | oreclosed, garnis | hed, attache | d, seized, or levied? | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property | | |
| | | Explain what happened | | | | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No ☐ Yes. Fill in the details. | | uding a bank or fir | nancial institution | , set off any a | amounts from your | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date taken | action was | Amount | | |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes | | erty in the possess | ion of an assigne | e for the ben | efit of creditors, a | | |
| Par | t 5: List Certain Gifts and Contributions | | | | | | | |
| 13. | Within 2 years before you filed for bankrup | etcy, did you give any gifts | s with a total value | of more than \$60 | 0 per person | ? | | |
| | ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | Describe the gifts | | Dates the g | s you gave ifts | Value | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | |

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Document Page 42 of 56 Debtor 1 Alicia Dodson Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Suburban Legal Group, PC \$1050 2017 \$1,050.00 1305 Remington Road Suite C Schaumburg, IL 60173 Credit Info Net \$65 for credit reports, credit counseling 2017 \$65.00 Dayton, OH and debtor education 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of **Date payment** Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Case number (if known)

Alicia Dodson Debtor 1

| 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device beneficiary? (These are often called asset-protection devices.) ■ No □ Yes. Fill in the details. | | | | | | of which you are a | | | |
|---|--|---|-------------------------|-----------------------|--|---|--|--|--|
| | Name of trust | Description and v | alue of the pro | perty trans | sferred | Date Transfer was made | | | |
| Par | t 8: List of Certain Financial Accounts, In: | struments, Safe Deposit | t Boxes, and S | torage Unit | ts | | | | |
| 20. | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, ohouses, pension funds, cooperatives, asso ■ No ■ Yes. Fill in the details. | or other financial accou | nts; certificates | s of deposi | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of acco instrument | ount or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe the contents | | Do you still have it? | | | |
| 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy No Yes. Fill in the details. | | | | | cy? | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | | the contents | Do you still have it? | | | |
| Par | t 9: Identify Property You Hold or Control | for Someone Else | | | | | | | |
| 23. | Do you hold or control any property that so for someone. | meone else owns? Incl | ude any proper | rty you bor | rowed from, are storing | for, or hold in trust | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | Value | | | |
| Par | t 10: Give Details About Environmental Info | ormation | | | | | | | |
| For | the purpose of Part 10, the following definiti | ons apply: | | | | | | | |

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Alicia Dodson

| 24. | . Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | |
|-----|--|--|--|--------------------|--|
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | |
| 26. | Have you been a party in any judicial or adminis | strative proceeding under any envi | ronmental law? Include settlements a | nd orders. | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | |
| Par | 11: Give Details About Your Business or Conr | nections to Any Business | | | |
| 27. | Within 4 years before you filed for bankruptcy, d | did you own a business or have an | y of the following connections to any | business? | |
| | ☐ A sole proprietor or self-employed in a tr | rade, profession, or other activity, | either full-time or part-time | | |
| | ☐ A member of a limited liability company | (LLC) or limited liability partnersh | ip (LLP) | | |
| | ☐ A partner in a partnership | | | | |
| | ☐ An officer, director, or managing executi | ive of a corporation | | | |
| | ☐ An owner of at least 5% of the voting or | equity securities of a corporation | | | |
| | ■ No. None of the above applies. Go to Part 1 | 12. | | | |
| | ☐ Yes. Check all that apply above and fill in the | ne details below for each business | 3. | | |
| | Business Name Des Address | scribe the nature of the business | Employer Identification number Do not include Social Security r | | |
| | | me of accountant or bookkeeper | Dates business existed | | |
| 28. | Within 2 years before you filed for bankruptcy, dinstitutions, creditors, or other parties. | did you give a financial statement t | | de all financial | |
| | ■ No | | | | |
| | Yes. Fill in the details below. | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | te Issued | | | |

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Debtor 1 Alicia Dodson

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Case number (if known)

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Alicia Dodson
Alicia Dodson
Signature of Debtor 2

Alicia Dodson
Signature of Debtor 2

Signature of Debtor 1

Date September 13, 2017

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No
Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
Yes. Name of Person

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Debtor 1 Alicla Dodson Trast-time Mode Name Last Name | Fill in this inform | ation to identify your o | ase: | | | | |
|--|--|---|---|--|--|--|--|
| Debtor 2 Copose f, Hing Frie Name Midde Name Last Name | Debtor 1 | Alicia Dodson | | | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (**Teneous**) Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: Creditors have claims secured by your property, or 2 you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Parts | | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if the beau) Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: 1 creditors have claims secured by your property, or 1 you have leased personal property and the lease has not expired. 1 you have leased personal property and the lease has not expired. 2 you have leased personal property and the lease has not expired. 3 you have leased personal property and the lease has not expired. 4 you must life this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form. If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). 2015. List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property that is collateral what is collateral what the property that is collateral secured adolt? 2. Creditor's Nissan Motor Acceptanc answer: 2. Retain the property and enter into a Relationation and the property lease is that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired decises are leases that are still in effect, the lease period has not yet ended. You may assume an unexp | | First Name | Middle Name | Last Name | | | |
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| Lessor's name: Description of leased Property: No Yes | | sed | | | ⊔ No | | |
| Description of leased Property: Yes | Property: | | | | ☐ Yes | | |
| Description of leased Property: Yes | l essor's name: | | | | □ No | | |
| | | sed | | | ⊔ NO | | |
| Lessor's name: | Property: | | | | ☐ Yes | | |
| | Lessor's name: | | | | □ No | | |

Official Form 108

Case 17-27353 Doc 1 Filed 09/13/17 Entered 09/13/17 11:25:34 Desc Main Document Page 47 of 56

| Debt | or 1 | Alicia Dodson | Case number (if known) |
|---|---------|---|---|
| Desc Prop | • | n of leased | ☐ Yes |
| | | ame: n of leased | □ No |
| Less | or's na | ame: n of leased | □ No |
| Property: Lessor's name: Description of leased Property: Lessor's name: Description of leased | | | ☐ Yes ☐ No |
| | | | ☐ Yes |
| Prop | erty: | Sign Below | ☐ Yes |
| Unde | r pena | | ention about any property of my estate that secures a debt and any personal |
| | Alicia | icia Dodson a Dodson ture of Debtor 1 | Signature of Debtor 2 |
| | Date | September 13, 2017 | Date |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| (| Chapter 7: | Liquidation |
|---|------------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| 4 | ÷ \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-27353 Doc 1 Filed 09/13/17 Entered 09/13/17 11:25:34 Desc Main Document Page 52 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Alicia Dodson | | Case No. | | | |
|-------------|---|---|--|--|---|--|
| | | Debtor(s) | Chapter | 7 | - | |
| | DISCLOSURE OF COMPI | ENSATION OF ATTORN | NEY FOR DE | EBTOR(S) | | |
| C | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | |
| | For legal services, I have agreed to accept | | \$ | 1,050.00 | | |
| | Prior to the filing of this statement I have received | d | \$ | 1,050.00 | | |
| | Balance Due | | \$ | 0.00 | | |
| 2. \$ | 335.00 of the filing fee has been paid. | | | | | |
| 3. T | he source of the compensation paid to me was: | | | | | |
| | ■ Debtor □ Other (specify): | | | | | |
| 4. T | The source of compensation to be paid to me is: | | | | | |
| | ■ Debtor □ Other (specify): | | | | | |
| 5. I | I have not agreed to share the above-disclosed con | npensation with any other person un | less they are mem | bers and associates of my law firm | | |
| [| I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n | | | | | |
| 6. I | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | |
| b. c. | Analysis of the debtor's financial situation, and ren Preparation and filing of any petition, schedules, st Representation of the debtor at the meeting of cred [Other provisions as needed] Negotiations with secured creditors to recagreements and applications as needed; of liens on household goods. | atement of affairs and plan which m itors and confirmation hearing, and a duce to market value; exemption | ay be required; any adjourned hea planning; prepar | rings thereof; ation and filing of reaffirmation | | |
| 7. B | by agreement with the debtor(s), the above-disclosed to Representation of the debtors in any disc adversary proceeding. | | | of from stay actions or any other | | |
| | | CERTIFICATION | | | - | |
| | certify that the foregoing is a complete statement of ankruptcy proceeding. | any agreement or arrangement for pa | yment to me for r | epresentation of the debtor(s) in | | |
| Se | eptember 13, 2017 | /s/ John P. Carlin | | | | |
| Da | | John P. Carlin 62772 | 222 | | | |
| | | Signature of Attorney John Carlin | | | | |
| | | 1305 Remington Roa | ad | | | |
| | | Suite C Schaumburg, IL 601 | 73 | | | |
| | | 847-843-8600 Fax: | | | | |
| | | jcarlin@suburbanleg | algroup.com | | | |
| | | Name of law firm | | | | |

United States Bankruptcy CourtNorthern District of Illinois

| | | _ , , | | |
|-------|---|--|------------------------------|----------------|
| In re | Alicia Dodson | | Case No. | |
| | | Debtor(s) | Chapter 7 | |
| | V | ERIFICATION OF CREDITOR N | MATRIX | |
| | | Number o | of Creditors: | 28 |
| | The above-named Debtor((our) knowledge. | s) hereby verifies that the list of cred | itors is true and correct to | the best of my |
| Date: | September 13, 2017 | /s/ Alicia Dodson Alicia Dodson | | |

Allied Interestate PO Box 1954 Southgate, MI 48195

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Barclays Bank Delaware 100 S West St Wilmington, DE 19801

Baxter Credit Union 340 N Milwaukee Avenue Vernon Hills, IL 60061

Baxter Ecu/BCU 340 N Milwaukee Ave. Attn: Bankruptcy Vernon Hills, IL 60061

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Citibank North America Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179

Comenity Bank/Gordmans Comenity Bank Po Box 182125 Columbus, OH 43218 Comenity Bank/Torrid Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bank/Victoria Secret Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Credit First National Assoc Attn: BK Credit Operations Po Box 81315 Cleveland, OH 44181

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193

Genesis Bankcard Srvs 15220 Nw Greenbrier Pkwy Ste 200 Beaverton, OR 97006

Great American Finance Attn: Bankruptcy 20 N Wacker Dr. Suite 2275 Chicago, IL 60606

Harris & Harris 111 W Jackson Blvd Suite 400 Chicago, IL 60604

Nissan Motor Acceptanc Po Box 660360 Dallas, TX 75266

Nissan Motor Acceptance Corp/Infinity Lt Attn: Bankruptcy Po Box 660360 Dallas, TX 75266

Personal Finance 1151 S Lee St Des Plaines, IL 60016 Santander Consumer USA Po Box 961245 Ft Worth, TX 76161

Syncb/hhgreg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/ Old Navy Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440

Us Dept Of Ed/Great Lakes Higher Educati Attn: Bankruptcy 2401 International Lane Madison, WI 53704

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040